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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF VIRGINIA	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Wayne Middle name Reter Last name and Suffix (Sr., Jr., II, III)		Jennifer First name Lynn Middle name Reter Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or			
	maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3216	2	xxx-xx-2793

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	otor 1 Jeremy Wayne Re otor 2 Jennifer Lynn Ret		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	11049 Franklin Street	If Debtor 2 lives at a different address: 20 Trot Lane Apt H
		Ferrum, VA 24088-2801	Lexington, VA 24450
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Franklin	Rockbridge
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. 56 Murat Road
		Number, P.O. Box, Street, City, State & ZIP Code	Lexington, VA 24450 Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	otor 1 Jeremy Wayne Re otor 2 Jennifer Lynn Ret					Case number (if known)
Par 7.	Tell the Court About Y				h see Notice Required h	y 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy
	Bankruptcy Code you are choosing to file under				1 and check the appropria	
	choosing to me under	■ Chap	ter 7			
		☐ Chap	ter 11			
		☐ Chap				
		☐ Chap	ter 13			
8.	How you will pay the fee	ab	out how yo	ou may pay. Typically, attorney is submitting	if you are paying the fee	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with
				the fee in installme e in Installments (Office		tion, sign and attach the Application for Individuals to Pay
		□ Ire	equest that t is not req	nt my fee be waived (uired to, waive your fe	You may request this opti e, and may do so only if y	on only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out
						ficial Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.	District		\\/h o n	Coop number
			District District		When When	Case number Case number
			District		When	Case number
10	Are any bankruptcy	_				
10.	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.				
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District	-	When	Case number, if known
11.	Do you rent your residence?	■ No.	Go to I	ine 12.		
	residence:	☐ Yes.	Has yo	our landlord obtained a	n eviction judgment agair	nst you?
				No. Go to line 12.		
				Yes. Fill out <i>Initial Sta</i> this bankruptcy petition		n Judgment Against You (Form 101A) and file it as part of

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	otor 1 Jeremy Wayne Re otor 2 Jennifer Lynn Ret			Case number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Proprie	etor	
12.	Are you a sole proprietor		·		
	of any full- or part-time business?	■ No.	Go to Part 4.		
		☐ Yes.	Name and location of but	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any		_
	If you have more than one sole proprietorship, use a		Number, Street, City, Sta	tte & ZIP Code	
	separate sheet and attach it to this petition.		Check the appropriate be	ox to describe your business:	
				ness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
			☐ None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can so a small business debtor, you must attach your most recent balance sheet federal income tax return or if any of these documents do not exist, follow	, statement of
	For a definition of small	■ No.	I am not filing under Cha	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in th	e Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bar	ıkruptcy Code.
Par	t 4: Report if You Own or	Have Any	√ Hazardous Property or Ar	y Property That Needs Immediate Attention	
14.	Do you own or have any property that poses or is alleged to pose a threat	■ No.			
	of imminent and identifiable hazard to public health or safety? Or do you own any		What is the hazard?		
	property that needs immediate attention?		If immediate attention is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?		
				Number, Street, City, State & Zip Code	
		-			-

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Debtor 1 Jeremy Wayne Reter
Debtor 2 Jennifer Lynn Reter

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-71604 Doc 1 Filed 11/29/18 Entered 11/29/18 12:31:39 Desc Maii Document Page 6 of 74

Deb	tor 1 Jeremy Wayne Ret tor 2 Jennifer Lynn Ret			Cas	e number (if kn	nown)
Part			anorting Purnoses		,	· / -
	What kind of debts do	16a.		ner debts? Consumer debts	are defined in	n 11 U.S.C. § 101(8) as "incurred by an
	you have?		individual primarily for a personal,			
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily busines money for a business or investmen			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe th	at are not consumer debts or	business deb	ots
17.	Are you filing under Chapter 7?	□ No.	I am not filling under Chapter 7. Go	o to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			s excluded and administrative expenses
	administrative expenses are paid that funds will		No			
	be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	□ 1-49		1 ,000-5,000		2 5,001-50,000
	you estimate that you owe?	50-99		☐ 5001-10,000 ☐ 40,004,35,000		☐ 50,001-100,000 ☐ More than100,000
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000		in More than 100,000
19.	How much do you	\$0 - \$!	50,000	□ \$1,000,001 - \$10 million	ı	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,00	01 - \$100,000	□ \$10,000,001 - \$50 millio		□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 milli □ \$100,000,001 - \$500 mil		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you	□ \$0 - \$9	50,000	□ \$1,000,001 - \$10 million	l	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 millio		\$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 milli □ \$100,000,001 - \$500 mil		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Part	7: Sign Below					
For	you	I have ex	amined this petition, and I declare u	under penalty of perjury that t	he informatior	n provided is true and correct.
			chosen to file under Chapter 7, I am ates Code. I understand the relief a			er Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.
			ney represents me and I did not pa t, I have obtained and read the noti			attorney to help me fill out this
		I request	relief in accordance with the chapte	er of title 11, United States Co	ode, specified	in this petition.
		bankrupto and 3571				perty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519,
			my Wayne Reter Wayne Reter		fer Lynn Re Lynn Reter	
			of Debtor 1		of Debtor 2	
		Executed	on <i>November 29, 2018</i>	Executed of	on Novem i	ber 29, 2018
			MM / DD / YYYY		MM / DD	· · · · · · · · · · · · · · · · · · ·

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Debtor 1 Jeremy Wayne R Jennifer Lynn Re		Cas	se number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, I for which the person is eligible. I also cer	United States Code, and have e tify that I have delivered to the	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) approximately schedules filed with the petition is incorrectly and the property of the		vledge after an inquiry that the information in the
to me tins page.	/s/ Bryan James Palmer	Date	November 29, 2018
	Signature of Attorney for Debtor		MM / DD / YYYY
	Bryan James Palmer		
	Printed name		
	Michael D. Hart, P.C.		
	Firm name		
	Post Office Box 622		
	Roanoke, VA 24004		
	Number, Street, City, State & ZIP Code		
	Contact phone 540 342-9736	Email address	service@hartlawroanoke.com
	45729 VA		
	Bar number & State		

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Fill	in this informa	ation to identify your	case:				
Deb	tor 1	Jeremy Wayne Re	eter				
Dob	tor 2	First Name	Middle Name	Last Name			
	ise if, filing)	Jennifer Lynn Rea	Middle Name	Last Name			
Unit	ed States Bank	cruptcy Court for the:	WESTERN DISTRICT	OF VIRGINIA			
Cas (if kno	e number						if this is an
						ameno	led filing
		_					
		m 106Sum			_		
				nd Certain Statistical Informat			2/15
infor	mation. Fill oເ	ıt all of your schedule	es first; then complete t	le are filing together, both are equally respon the information on this form. If you are filing a ck the box at the top of this page.			
Part	1: Summai	rize Your Assets					
						Your as Value of	ssets f what you own
1.	Schedule A/E 1a. Copy line	3: Property (Official Fo 55, Total real estate, fr	orm 106A/B) om Schedule A/B			\$	0.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B	B		\$	17,400.97
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	17,400.97
Part	2: Summa	rize Your Liabilities					
							abilities you owe
2.			aims Secured by Propen nn A, Amount of claim, a	ty (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedu</i>	le D	\$	17,195.81
3.			Unsecured Claims (Offici	ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part 2	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F		\$	66,549.28
				Your total lial	oilities \$_		83,745.09
Part	3: Summa	rize Your Income and	Evnancas				
	•		•				
4.		our Income (Official Formbined monthly income		le I		\$	6,127.84
5.		our Expenses (Official onthly expenses from lir				\$	6,115.41
Part	4: Answer	These Questions for	Administrative and Sta	itistical Records			
6.	Are you filing	g for bankruptcy unde	er Chapters 7, 11, or 13	?			
				Check this box and submit this form to the court	with your o	ther sch	edules.
	Yes						
7.	What kind of	debt do you have?					
				r debts are those "incurred by an individual prima -9g for statistical purposes. 28 U.S.C. § 159.	rily for a pe	ersonal,	family, or
	☐ Your de	bts are not primarily o	consumer debts. You ha	ave nothing to report on this part of the form. <i>Ch</i>	eck this bo	x and su	ıbmit this form to
Offic	the court cial Form 106S	with your other scheduum Summary o		oilities and Certain Statistical Information		n	age 1 of 2

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Debtor 1 Debtor 2	Jeremy Wayne Reter Jennifer Lynn Reter	Case number (if known)	
	n the Statement of Your Current Monthly Income: Cop -1 Line 11: OR. Form 122B Line 11: OR. Form 122C-1 Li		\$ 3,817.14

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,922.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,922.00

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gory, list the asset in t	☐ Check if this is an amended filing
gory, list the asset in t	
gory, list the asset in t	
gory, list the asset in t	12/15
illy responsible for sup e your name and case	pplying correct
	aims or exemptions. Put d claims on <i>Schedule D:</i>
editors Who Have Clain	ns Secured by Property.
rrent value of the tire property?	Current value of the portion you own?
the property:	portion you own:
\$5,125.00	\$5,125.00
e amount of any secured	
	Current value of the
tire property?	portion you own?
	\$4,450.00
ne Cr	the amount of any secured creditors Who Have Clain current value of the ntire property? \$8,900.00

☐ Yes

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Debtor 1 Debtor 2	Jeremy Wayne Reter Jennifer Lynn Reter	Case number (if known)	
	he dollar value of the portion you own for all of your entries from Part 2, inclus you have attached for Part 2. Write that number here		\$9,575.00
Part 3:	Describe Your Personal and Household Items		
	own or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> □ No	chold goods and furnishings ples: Major appliances, furniture, linens, china, kitchenware s. Describe		dams of exemptions.
	Bed, night stand and TV		\$225.00
	Table, chairs, 3 dressers, 2 beds, TV & Printer		\$770.00
■ No	 ponics ples: Televisions and radios; audio, video, stereo, and digital equipment; computers including cell phones, cameras, media players, games bescribe 	s, printers, scanners; music col	ections; electronic devices
Exam _i ■ No	 tibles of value ples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other collections, memorabilia, collectibles bescribe 	other art objects; stamp, coin, c	r baseball card collections;
Exam _i ■ No	ment for sports and hobbies ples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tab musical instruments s. Describe	oles, golf clubs, skis; canoes an	d kayaks; carpentry tools;
■ No	rms mples: Pistols, rifles, shotguns, ammunition, and related equipment s. Describe		
□ No	mples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
■ Yes	s. Describe Everyday clothing including jewelry (watch and cos	stume iewelry)	\$600.00
■ No □ Yes 13. Non-	elry mples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloc s. Describe farm animals		
■ No	mples: Dogs, cats, birds, horses s. Describe		
■ No	other personal and household items you did not already list, including any he	alth aids you did not list	_

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Debtor 1 Debtor 2		known)
	d the dollar value of all of your entries from Part 3, including any entries for pages you have attach Part 3. Write that number here	ed \$1,595.00
Part 4: D	Describe Your Financial Assets	
Do you o	own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	mples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file you	r petition
■ Yes	S	¢20.00
	Cash	\$20.00
Exan	osits of money mples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, broke institutions. If you have multiple accounts with the same institution, list each. Institution name:	erage houses, and other similar
	17.1. checking & savings Member One FCU	\$398.00
	17.2. checking & savings Capital One	\$0.50
	17.3. checking & savings Freedom First	\$0.50
	17.4. checking & savings Langley FCU	\$0.50
Exan ■ No	ds, mutual funds, or publicly traded stocks mples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name:	
19. Non- joint	publicly traded stock and interests in incorporated and unincorporated businesses, including an i	nterest in an LLC, partnership, and
■ No □ Yes	s. Give specific information about them	
Nego Non-	ernment and corporate bonds and other negotiable and non-negotiable instruments otiable instruments include personal checks, cashiers' checks, promissory notes, and money ordersnegotiable instruments are those you cannot transfer to someone by signing or delivering them.	
■ No □ Yes	s. Give specific information about them Issuer name:	
	ement or pension accounts mples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sl	naring plans
☐ Yes	s. List each account separately. Type of account: Institution name:	

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Debtor :	, ,		Case number (if known)					
You Exa	amples: Agreements with landlords,	nave made so that you may continue service or use from prepaid rent, public utilities (electric, gas, water), telecc	m a company ommunications companies, o	or others				
■ No	o es	Institution name or individual:						
_		ment of money to you, either for life or for a number of	years)					
■ No	o es Issuer name and o	description.						
26 U	J.S.C. §§ 530(b)(1), 529A(b), and 52	ecount in a qualified ABLE program, or under a qua	lified state tuition progran	n.				
■ No		nd description. Separately file the records of any intere	sts.11 U.S.C. § 521(c):					
25. Tru s		n property (other than anything listed in line 1), and	rights or powers exercisa	able for your benefit				
	es. Give specific information about t	them						
_Exa	amples: Internet domain names, web	e secrets, and other intellectual property sites, proceeds from royalties and licensing agreemen	ts					
	No☐ Yes. Give specific information about them							
Exa ■ No	0	icenses, cooperative association holdings, liquor licens	es, professional licenses					
	es. Give specific information about t	nem		Current value of the				
woney	or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.				
■ Ye	es. Give specific information about the	hem, including whether you already filed the returns an	d the tax years					
		2018 Income Tax Refund pro-rata (2017 \$4,835.00)	Federal	\$4,432.01				
Exa ■ No		ny, spousal support, child support, maintenance, divord	ce settlement, property settle	ement				
	benefits; unpaid loans you r	urance payments, disability benefits, sick pay, vacation nade to someone else	pay, workers' compensation	on, Social Security				
■ Ye	es. Give specific information							
		Garnished Funds		\$1,189.02				
	Γ	Garnished Funds		\$190.44				

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			11/29/18 12:29F
Debto Debto		Case number (if known)	
	terests in insurance policies xamples: Health, disability, or life insurance; health savings account (H	SA); credit, homeowner's, or renter's insural	nce
	No		
□ [,]	Yes. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If so	ny interest in property that is due you from someone who has died you are the beneficiary of a living trust, expect proceeds from a life insomeone has died.		eive property because
	No Yes. Give specific information		
	aims against third parties, whether or not you have filed a lawsuit xamples: Accidents, employment disputes, insurance claims, or rights to No		
	Yes. Describe each claim		
	· · ·	counterclaims of the debtor and rights to	set off claims
П,	Yes. Describe each claim		
	ny financial assets you did not already list No Yes. Give specific information		
	Add the dollar value of all of your entries from Part 4, including any or Part 4. Write that number here		\$6,230.97
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In	. List any real estate in Part 1.	
	you own or have any legal or equitable interest in any business-related pro	pperty?	
■ N	o. Go to Part 6.		
ПΥ	es. Go to line 38.		
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own If you own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
_	you own or have any legal or equitable interest in any farm- or co	ommercial fishing-related property?	
	Yes. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did I	Not List Above	
	you have other property of any kind you did not already list? xamples: Season tickets, country club membership No		
	Yes. Give specific information		
54. A	Add the dollar value of all of your entries from Part 7. Write that nu	mber here	\$0.00

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	tor 1 tor 2	Jeremy Wayne Reter Jennifer Lynn Reter			Case number (if known)		
Part	8:	List the Totals of Each Part of this Form					
55.	Part 1	1: Total real estate, line 2				\$0.00	
56.	Part 2	2: Total vehicles, line 5		\$9,575.00	_		
57.	Part 3	3: Total personal and household items, line 15		\$1,595.00			
58.	Part 4	4: Total financial assets, line 36		\$6,230.97			
59.	Part 5	5: Total business-related property, line 45		\$0.00			
60.	Part 6	6: Total farm- and fishing-related property, line 52		\$0.00			
61.	Part 7	7: Total other property not listed, line 54	+	\$0.00			
62.	Total	personal property. Add lines 56 through 61		\$17,400.97	Copy personal property total	\$17,400.97	
63.	Total	of all property on Schedule A/B. Add line 55 + line 62				\$17,400.97	

Official Form 106A/B Schedule A/B: Property page 6

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11	/20/12	12-29PM

Debtor 1	Jeremy Wayne R	eter		
	First Name	Middle Name	Last Name	
Debtor 2	Jennifer Lynn Re	ter		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	DF VIRGINIA	
Case number				☐ Check if this is an
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	otions are	you claiming?	Check one only	. even if	vour spouse i	s filina with	vou.
----	--------------------	------------	---------------	----------------	-----------	---------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemp	
Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
\$5,125.00		\$947.19	Va. Code Ann. § 34-26(8)	
		100% of fair market value, up to any applicable statutory limit		
\$4,450.00		\$0.00	Va. Code Ann. § 34-26(8)	
		100% of fair market value, up to any applicable statutory limit		
\$225.00		\$225.00	Va. Code Ann. § 34-26(4a)	
		100% of fair market value, up to any applicable statutory limit		
\$770.00		\$770.00	Va. Code Ann. § 34-26(4a)	
		100% of fair market value, up to any applicable statutory limit		
\$600.00		\$600.00	Va. Code Ann. § 34-26(4)	
	\$4,450.00 \$7770.00	\$4,450.00 \$7770.00 \$7770.00	Check only one box for each exemption. Schedule A/B \$5,125.00 \$947.19 100% of fair market value, up to any applicable statutory limit \$4,450.00 100% of fair market value, up to any applicable statutory limit \$225.00 100% of fair market value, up to any applicable statutory limit \$770.00 100% of fair market value, up to any applicable statutory limit	

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Debtor Debtor				Case number (if known)	
Bri Sc.	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ash ne from <i>Schedule A/B</i> : 16.1	\$20.00	•	\$20.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	necking & savings: Member One	\$398.00		\$398.00	Va. Code Ann. § 34-4
	e from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	necking & savings: Capital One the from Schedule A/B: 17.2	\$0.50		\$0.50	Va. Code Ann. § 34-4
	o nom concadio, v.z.			100% of fair market value, up to any applicable statutory limit	
	necking & savings: Freedom First	\$0.50		\$0.50	Va. Code Ann. § 34-4
	ie iioni Genedale 74 B. 1776			100% of fair market value, up to any applicable statutory limit	
	necking & savings: Langley FCU	\$0.50		\$0.50	Va. Code Ann. § 34-4
	io II officiale 7/ B. 1714			100% of fair market value, up to any applicable statutory limit	
	ederal: 2018 Income Tax Refund o-rata	\$4,432.01		\$3,262.38	Va. Code Ann. § 34-26(9)
(2	017 \$4,835.00) ee from <i>Schedule A/B</i> : 28.1			100% of fair market value, up to any applicable statutory limit	
	ederal: 2018 Income Tax Refund o-rata	\$4,432.01		\$1,169.63	Va. Code Ann. § 34-4
(2	0-1714 017 \$4,835.00) ee from <i>Schedule A/B</i> : 28.1			100% of fair market value, up to any applicable statutory limit	
	arnished Funds are from Schedule A/B: 30.1	\$1,189.02		\$1,189.02	Va. Code Ann. § 34-4
LIII	le IIOIII <i>Schedule A/B.</i> 30. I			100% of fair market value, up to any applicable statutory limit	
	arnished Funds are from Schedule A/B: 30.2	\$190.44		\$190.44	Va. Code Ann. § 34-4
	ie iioni denedale 74 B. 9012			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption ubject to adjustment on 4/01/19 and every No			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No □ Yes				

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					11/29/10 12.29F
Fill in this information to identify you	ur case:				
Debtor 1 Jeremy Wayne	Reter				
First Name	Middle Name	Last Name		-	
Debtor 2 Jennifer Lynn F				_	
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	: WESTERN DISTRICT OF VIRO	SINIA			
				-	
Case number (if known)				Charle	if their in one
(ii Kilowii)					if this is an
<u> </u>				amend	led filing
Official Form 106D					
Schedule D: Creditors	Mha Haya Claims	Sacurad	by Proport		40/45
Scriedule D. Creditors	WIID Have Claims	<u>secureu</u>	by Propert	<u>y </u>	12/15
Be as complete and accurate as possible. is needed, copy the Additional Page, fill it number (if known).					
1. Do any creditors have claims secured b	y your property?				
	this form to the court with your other	echadulas Va	Lhave nothing also t	to report on this form	
<u> </u>	•	scriedules. 100	a nave nothing else t	to report on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has			Column A	Column B	Column C
for each claim. If more than one creditor has much as possible, list the claims in alphabeti			Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	iodi ordor docording to the ordation o mani-	0.	value of collateral.	claim	If any
2.1 40 West Auto Sales, Inc.	Describe the property that secures t	he claim:	\$4,177.81	\$5,125.00	\$0.00
Creditor's Name	2002 GMC Sierra 1500 165,0	00 miles			
11241 Franklin Street	As of the date you file, the claim is:	Check all that			
Ferrum, VA 24088	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
rumbor, enest, eny, enaile a 2.p esac	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as r	mortgage or secu	red		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	•			
☐ Check if this claim relates to a	Other (including a right to offset)	Lien on Title	9		
community debt	, , , , , , , , , , , , , , , , , , ,				-
Date debt was incurred 8/7/18	Last 4 digits of account numl	ber			
2.2 Cars Financial	Describe the property that secures t	the claim:	\$13,018.00	\$8,900.00	\$4,118.00
Creditor's Name	2013 Kia Sorento 145,000 m.		γ : ο, σ : σ : σ : σ : σ : σ : σ : σ : σ : σ		<u> </u>
	As of the date you file, the claim is:	Ob a also all the at			
Po Box 630	apply.	Check all that			
Christiansburg, VA 24073	☐ Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who are the dah(CC)	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as r car loan)	mortgage or secu	red		
Debtor 2 only	′	ah a a lata 12 a N			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	cnanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit	Lion on Title	_		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Lien on Title	;		

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Debtor 1	Jeremy Wa	ayne Reter		Ca	ase number (if known)	
F	irst Name	Middle Name	Last Name		_	
Debtor 2	Jennifer L	ynn Reter				
F	irst Name	Middle Name	Last Name			
Date debt wa	as incurred	Opened 6/30/18 Last Active 9/04/18	Last 4 digits of account number	4701		
If this is th		of your form, add the do	n A on this page. Write that number hollar value totals from all pages.	ere:	\$17,195.81 \$17,195.81	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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								1	1/29/18 12:29PM
Fill	in this informatior	n to identify your ca	ase:						
Deb	otor 1 Je	eremy Wayne Ret	ter						
		st Name	Middle Name		Last Name				
		ennifer Lynn Rete							
(Spo	use if, filing) Firs	st Name	Middle Name		Last Name				
Unit	ed States Bankrupt	tcy Court for the:	WESTERN DISTRI	CT OF VIR	GINIA				
Cas	e number								
(if kn	own)							Check if this is	an
							ć	amended filing	1
∩ff	icial Form 10	SE/E							
			a Hava Hac	oourod	Claims			12/	45
			no Have Unse		Y claims and Part 2 for 0				
eft. A	Attach the Continuati e and case number (i	ion Page to this page	. If you have no inforr		needed, copy the Part yo port in a Part, do not file				
		e priority unsecured							
	No. Go to Part 2.	re priority unsecured	olalilis agailist you i						
	_								
	☐ Yes. t 2: List All of Y	OUR NONDDIODITY	Unsecured Claims	_					
			red claims against yo						
	■ No. You have noth	ning to report in this par	t. Submit this form to the	ne court with	your other schedules.				
	Yes.								
	unsecured claim, list t	he creditor separately t	or each claim. For eac	h claim listed	ne creditor who holds ear d, identify what type of clain have more than three non	m it is. Do not list cla	ims already in	cluded in Part 1	. If more
								Total claim	
4.1	Advance Am	nerica	Last 4 o	digits of acc	ount number				\$569.00
	Nonpriority Credi								
	172 Walker S		When v	was the debt	incurred?			_	
	Lexington, V	ity State Zlp Code	As of the	ne date vou	file, the claim is: Check a	all that apply			
		e debt? Check one.			,				
	Debtor 1 only		☐ Con	tingent					
	Debtor 2 only			quidated					
	Debtor 1 and	Debtor 2 only	☐ Disp	outed					
		of the debtors and anoth	her Type of	NONPRIOR	RITY unsecured claim:				
	_	claim is for a comm	Пон	dent loans					
	debt		☐ Obli		ng out of a separation agre	ement or divorce that	at you did not		
	Is the claim sub	ject to offset?	•	s priority clai					
	■ No			•	or profit-sharing plans, ar	nd other similar debts	3		
	☐ Yes		Othe	er. Specify _	Payday Loans			_	

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Debtor Debtor	1 Jeremy Wayne Reter 2 Jennifer Lynn Reter		Case number (if known)	
4.2	Amer Fst Fin Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$1,317.00
	7330 W. 33rd Street Wichita, KS 67205	When was the debt incurred?	Opened 9/01/17 Last Active 10/12/17	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	□ Debtor 1 only ■ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharing ☐ Other. Specify		
4.3	BB&T Nonpriority Creditor's Name Recovery Department	Last 4 digits of account number When was the debt incurred?	5583	\$1,074.65
	4251 Fayetteville Road Lumberton, NC 28359 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	d alater.	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.4	Carilion Clinic Nonpriority Creditor's Name	Last 4 digits of account number		\$75.25
	P.O. Box 13966 Roanoke, VA 24038	When was the debt incurred?	8/1/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	Like	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify <i>Medical Ex</i>		
		Other. Specify		

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Debtor Debtor	1 Jeremy Wayne Reter 2 Jennifer Lynn Reter		Case number (if known)	
4.5	Carter Bank & Trust	Last 4 digits of account number	8406	\$340.00
	Nonpriority Creditor's Name 2155 Jefferson Davis Hwy Stafford, VA 22554	When was the debt incurred?	6/10/13	
-	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Judgment		
4.6	City National Bank Nonpriority Creditor's Name	Last 4 digits of account number		\$1,587.07
	Attn: Bankruptcy PO Box 785057	When was the debt incurred?		
	Orlando, FL 32878			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
	_	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	1 claim:	
	☐ At least one of the debtors and another	Student loans	a Glaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
4.7	Commonwealth Financial	Last 4 digits of account number	43N1	\$61.00
	Nonpriority Creditor's Name		0.0000000000000000000000000000000000000	<u>, , , , , , , , , , , , , , , , , , , </u>
-	245 Main St Dickson City, PA 18519 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 05/18 is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection Phys Llp	Attorney Lexington Va Emerg	

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	1 Jeremy Wayne Reter 2 Jennifer Lynn Reter		Case number (if known)		
Deptor /	2 Jennier Lynn Reter		Case number (ir known)		
	Credit Control Corp	Last 4 digits of account number		\$202.00	
	Nonpriority Creditor's Name 11821 Rock Landing Dr Newport News, VA 23606	When was the debt incurred?	Opened 03/15		
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Collection Nutritional	Attorney Home Iv Care Ser		
	Creditors Collection Service	Last 4 digits of account number	2611	\$206.00	
	Nonpriority Creditor's Name 4530 Old Cave Spring Road Roanoke, VA 24018	When was the debt incurred?	Opened 03/17		
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
4.1	Creditors Collection Service	Last 4 digits of account number	3692	\$90.00	
	Nonpriority Creditor's Name PO Box 21504 Roanoke, VA 24018	When was the debt incurred?	Opened 02/17		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	_	□ Debts to pension or profit-sharin	a plans, and other similar debte		
	■ No				
	Yes	Other. Specify			

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	r 1 Jeremy Wayne Reter r 2 Jennifer Lynn Reter	Case number (if known)			
4.1 1	Defense Finance & Accounting Servic	Last 4 digits of account number 2028	\$476.73		
	Nonpriority Creditor's Name E. Broad St BLDG 21 Columbus, OH 43218-1152	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1	Defense Finance & Accounting Servic	Last 4 digits of account number 9364	\$527.38		
	Nonpriority Creditor's Name E. Broad St BLDG 21 Columbus, OH 43218-1152	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1	Diversified Consultant	Last 4 digits of account number 3632	\$3,746.00		
	Nonpriority Creditor's Name 10550 Deerwood Park Blvd Jacksonville, FL 32256	When was the debt incurred? Opened 07/18			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Collection Attorney Sprint			

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Jeremy Wayne Reter Jennifer Lynn Reter		Case number (if known)	
Diversified Consultant	Last 4 digits of account number	4783	\$1,20
Nonpriority Creditor's Name 10550 Deerwood Park Blvd Jacksonville, FL 32256	When was the debt incurred?	Opened 06/18	
Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Comcast	
Eos Cca	Last 4 digits of account number	0051	\$3,53
Nonpriority Creditor's Name Po Box 981008 Boston, MA 02298	When was the debt incurred?	Opened 06/17	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	a plane, and other similar debts	
■ No Yes		Attorney Verizon Wireless	
	Other. Specify	The state of the s	
First Premier Bank	Last 4 digits of account number	7723	\$43
Nonpriority Creditor's Name 3820 N Louise Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 04/14 Last Active 5/31/14	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	□ Debts to pension or profit-sharin	g plans, and other similar debts	
— NO	Other. Specify Credit Card		

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Freedom First Credit Union		3\$01	¢004.0
Nonpriority Creditor's Name	Last 4 digits of account number		\$804.0
5240 Valleypark Drive Roanoke, VA 24019	When was the debt incurred?	11/2018	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Bank Charg	ges	
GAD Finance Inc	Last 4 digits of account number	0551	\$16,147.0
Nonpriority Creditor's Name	_	Opened 04/12 Lest Active	
2032 Peters Creek Road Roanoke, VA 24017	When was the debt incurred?	Opened 04/13 Last Active 3/19/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify	g plants, and smell similar costs	
Gm Financial	Last 4 digits of account number	5575	\$3,472.0
Nonpriority Creditor's Name Po Box 181145 Arlington, TX 76096	When was the debt incurred?	Opened 03/16 Last Active 9/13/17	
Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	, to or the date you me, the claim.	o. Onook all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
■ No	Other. Specify Deficiency	g p.a, and other ominar dobte	

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1 Jeremy Wayne Reter 1 Jennifer Lynn Reter	Case number (if known)			
Hunt Ridge Associates LLC	Last 4 digits of account number	\$1,830.0		
Nonpriority Creditor's Name 5 Office Canter Lane	When was the debt incurred? 9/10/18			
Lexington, VA 24450 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Judgment			
I C System Inc	Last 4 digits of account number 6001	\$1,020.0		
Nonpriority Creditor's Name Po Box 64378	When was the debt incurred? Opened 01/15			
Saint Paul, MN 55164 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	no or and take you may and orannier or sort an anat appry			
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	□ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other. Specify			
I C System Inc	Last 4 digits of account number 2598	\$761.0		
Nonpriority Creditor's Name Po Box 64378 Soint Paul MN 55164	When was the debt incurred? Opened 06/18			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other. Specify Collection Attorney Att Directv			

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Debto Debto	r 1 Jeremy Wayne Reter r 2 Jennifer Lynn Reter		Case number (if known)	
4.2 3	Jefferson Capital Syst	Last 4 digits of account number	2003	\$10,171.00
	Nonpriority Creditor's Name 16 Mcleland Rd Saint Cloud, MN 56303	When was the debt incurred?	Opened 08/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Factoring (Company Account Drivetime	
4.2	Jefferson Capital Syst Nonpriority Creditor's Name	Last 4 digits of account number	0003	\$1,704.00
	16 Mcleland Rd Saint Cloud, MN 56303	When was the debt incurred?	Opened 03/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Wireless	Company Account Verizon	
4.2 5	Lincare	Last 4 digits of account number		\$8.32
	Nonpriority Creditor's Name PO Box 687 Forest, VA 24551-0687	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharir	g plans, and other similar debts	
	■ No □ Yes			
	⊔ res	Other. Specify		

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Medical Data Systems I	Look 4 digito of account number	0000	\$0.0
Nonpriority Creditor's Name	Last 4 digits of account number		φυ.υ
128 W Center Ave Fl 2 Sebring, FL 33870	When was the debt incurred?	Opened 01/15	
Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	□ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Augusta Health	
Military Star	Last 4 digits of account number	7072	\$0.0
Nonpriority Creditor's Name			· · · · · · · · · · · · · · · · · · ·
3911 S Walton Walker Blv Dallas, TX 75236	When was the debt incurred?	Opened 12/13/93 Last Active 5/01/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	5 T	
Yes	■ Other. Specify Charge Acc	count	
Montgomery Ward	Last 4 digits of account number	6290	\$135.0
Nonpriority Creditor's Name		Opened 03/16 Last Active	
1112 7th Ave Monroe, WI 53566	When was the debt incurred?	9/12/16	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
■ No	■ Other. Specify Charge Acc	• •	

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	r 1 Jeremy Wayne Reter r 2 Jennifer Lynn Reter		Case number (if known)	
4.2 9	PayPal, Inc	Last 4 digits of account number	8596	\$37.95
	Nonpriority Creditor's Name P. O. Box 45950 Omaha, NE 68145	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	Physicians to Children	Last 4 digits of account number		\$24.67
	Nonpriority Creditor's Name PO Box 8540	When was the debt incurred?		
	Roanoke, VA 24014-0540			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	Pionr Midctr	Last 4 digits of account number	2177	\$0.00
	Nonpriority Creditor's Name 4700 Belleview Ave Ste 3 Kansas City, MO 64112	When was the debt incurred?	Opened 12/07 Last Active 4/02/09	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		

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tor 2 Jennifer Lynn Reter		Case number (if known)	
Pssf Inc Nonpriority Creditor's Name	Last 4 digits of account number	2466	\$2,850.00
4700 Belleview Ave Ste 3 Kansas City, MO 64112	When was the debt incurred?	Opened 11/08 Last Active 11/01/09	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Installment	Sales Contract	
Receivable Management	Last 4 digits of account number	4607	\$94.00
Nonpriority Creditor's Name			φο ποι
240 Emery St Bethlehem, PA 18015	When was the debt incurred?	Opened 07/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify	Attorney Progressive Advanced	
Robert C Hull DDS PC	Last 4 digits of account number		\$174.40
Nonpriority Creditor's Name 650 North Lee HWY Ste 1	When was the debt incurred?	2017	
Lexington, VA 24450-3759 Number Street City State Zlp Code	As of the date you file, the claim i	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim?	S. Olleck all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	= 1	
☐ Yes	■ Other. Specify Dental Exp	enses	

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Jennifer Lynn Reter		Case number (if known)	
Rockbridge County Schools	Last 4 digits of account number		\$58.6
Nonpriority Creditor's Name			
	_		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
Sca Cred Svc	Last 4 digits of account number	3430	\$108.0
Nonpriority Creditor's Name	_		
1502 Williamson Road Ne Roanoke, VA 24012	When was the debt incurred?	Opened 10/20/17	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
□ Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
s the claim subject to offset?			
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Carilion Ortho Trauma Ccr3		
Schewel Furniture	Last 4 digits of account number	0001	\$629.0
Nonpriority Creditor's Name	-	Opened 10/05/13 Last Active	
485 E Nelson St Lexington, VA 24450	When was the debt incurred?	5/29/14	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community debt	☐ Student loans		
geot s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Deficiency		

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Southwest Credit Syste Nonpriority Creditor's Name	Last 4 digits of account number	3351	\$928
4120 International Pkwy Carrollton, TX 75007	When was the debt incurred?	Opened 06/18	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing		
Yes	Other. Specify Collection	Attorney Comcast	
Sterling Properties & Managment Nonpriority Creditor's Name	Last 4 digits of account number		\$3,175.
21 W Nelson Street Lexington, VA 24450	When was the debt incurred?	12/11/17	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community debt	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Judgment		
Tbom/total Crd	Last 4 digits of account number	5334	\$466
Nonpriority Creditor's Name	- Last 4 digits of account number		V 1001
5109 S Broadband Ln Sioux Falls, SD 57108	When was the debt incurred?	Opened 05/17 Last Active 9/06/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
□ Yes	■ Other. Specify Credit Card		

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	Jeremy Wayne Reter Jennifer Lynn Reter		Case number (if known)	
	Tbom/total Crd Nonpriority Creditor's Name	Last 4 digits of account number	9700	Unknown
4	5109 S Broadband Ln Sioux Falls, SD 57108	When was the debt incurred?	Opened 03/17 Last Active 9/06/17	
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
C	debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
1	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
ſ	Yes	Other. Specify Credit Card	<u> </u>	
	The Danbury Mint	Last 4 digits of account number	5001	\$102.60
	Nonpriority Creditor's Name 47 Richards Avenue Norwalk, CT 06857	When was the debt incurred?	2/5/18	
1	Number Street City State Zlp Code Nho incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
ı	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
I	☐ Debtor 1 and Debtor 2 only	Disputed		
I	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
I	☐ Check if this claim is for a community	☐ Student loans		
	debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing	g plans, and other similar debts	
ſ	Yes	Other. Specify		
	Transworld Sys Inc/51	Last 4 digits of account number	3798	\$98.00
4	Nonpriority Creditor's Name 500 Virginia Dr Ste 514 Ft Washington, PA 19034	When was the debt incurred?	Opened 02/17	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
1	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
I	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
I	☐ Check if this claim is for a community	☐ Student loans		
	debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	·	Attorney Medexpress Urgent	

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Transworld Sys Inc/51 Nonpriority Creditor's Name	Last 4 digits of account number	1741	\$0.00
500 Virginia Dr Ste 514 Ft Washington, PA 19034	When was the debt incurred?	Opened 2/18/15 Last Active 8/24/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Care Va	Attorney Medexpress Urgent	
Trident Asst	Last 4 digits of account number	1114	\$85.0
Nonpriority Creditor's Name 10375 Old Alabama Rd Ste Alpharetta, GA 30022	When was the debt incurred?	Opened 11/12/11	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify		
U S Dept Of Ed/GsI/AtI Nonpriority Creditor's Name	Last 4 digits of account number	9632	\$3,922.00
Po Box 4222 Iowa City, IA 52244	When was the debt incurred?	Opened 10/11 Last Active 7/08/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:		
☐ Debtor 1 and Debtor 2 only			
☐ At least one of the debtors and another			
☐ Check if this claim is for a community	■ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	Other. Specify		

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University Of Phoenix	Last 4 digits of account number	4632	\$446.00
Nonpriority Creditor's Name 4615 E Elwood St FI 3 Phoenix, AZ 85040	When was the debt incurred?	Opened 11/12	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans		
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Unsecured		
Us Dept Of Ed/glelsi Nonpriority Creditor's Name	Last 4 digits of account number	8581	\$0.00
2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 10/03/11 Last Active 4/30/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	Other. Specify		
	Educationa	ı	
Uscb Corporation Nonpriority Creditor's Name	Last 4 digits of account number	0715	\$1,392.00
101 Harrison St	When was the debt incurred?	Opened 09/17	
Archbald, PA 18403 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	□ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Collection Attorney Penn Foster School		

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As Valley Credit Service Last 4 digits of account number O019 \$156.00	Debto	or 1 Jeremy Wayne Reter or 2 Jennifer Lynn Reter		Case number (if known)	
Po Box 7090 Charlottesville, VA 22906 Number Street City Stant 2jp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 fits claim is for a community debt. Is the claim subject to offset? Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 4 and Debtor 2 only De			Last 4 digits of account number	0019	\$156.00
Charlottes Ville, VA 22906 Number Street City Shate (1) Dodge Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only At least one of the debtors and another Check if this claim is for a community debt Street City Shate (1)			When was the debt incurred?	Opened 05/13	
Debtor 1 only		Charlottesville, VA 22906	_		
Debtor 2 only		Who incurred the debt? Check one.	•	,	
Debtor 1 and Debtor 2 only		Debtor 1 only	☐ Contingent		
At least one of the debtors and another Chock it this claim is for a community debt Student loans Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority; claims Obligations arising out of a separation agreement or divorce that you did not report as priority; claims Obligations arising out of a separation agreement or divorce that you did not report as priority; claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as proority claims Obligations arising out of a separation agreement or divorce that you did not report as proority claims Obligations arising out of a separation agreement or divorce that you did not report as proority claims		☐ Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt Check if this claim subject to offset? Collection Attorney Eye One Pic T A		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
Check it this claim is of a Community		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
St the claim subject to offset?		☐ Check if this claim is for a community	☐ Student loans		
Yes				ration agreement or divorce that you did not	
Yes		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Valley Credit Service Last 4 digits of account number OU37 \$105.00		☐ Yes	■ Other. Specify Augusta E	Attorney Eye One Plc T A ve A	
Nonpriority Creditor's Name Po Box 7090 Charlottesville, VA 22906 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Contingent		Vallev Credit Service	Last 4 digits of account number	0037	\$105.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Disputed	1	Nonpriority Creditor's Name	_		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 debt is the claim subject to offset? Nonpriority Creditor's Name Po Box 7090 Charlottesville, VA 22906 Number Street City State Zip Code Who incurred the debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only No Incurred the debtors and another Debtor 1 only Debtor 2 only No Incurred 9 only Student loans Debtor 1 only Debtor 1 only Debtor 2 only Student loans Debtor 2 only Student loans Debtor 3 only Student loans Debtor 4 only Debtor 8 only Debtor 5 only Student loans Debtor 6 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 9 only De					
Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Augusta Health Care For Women No Noprofirity Creditor's Name Po Box 7090 Charlottesville, VA 22906 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Debtor 2 only		•	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 period Nonder Specify No Last 4 digits of account number Po Box 7099 Charlottes ville, VA 22906 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 bettor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 5 only Debtor 6 of the debtors and another Check if this claim is for a community debt Student loans Debtor 5 only Debtor 6 offset? No Debtor 8 only Debtor 9 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 8 only Debtor 9 only Debt		☐ Debtor 1 only	☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Collection Attorney Augusta Health Care Po Box 7090 Charlottesville, VA 22906 Number Street City State ZIp Code Who incurred the debt? Check one. Debts 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Student loans Collection Attorney Augusta Health Care For Women Collection Attorney Augusta Health Care For Women When was the debt incurred? Opened 03/16 As of the date you file, the claim is: Check all that apply Contingent Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare		Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Collection Attorney Augusta Health Care For Women		☐ Debtor 1 and Debtor 2 only	•		
Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		\square At least one of the debtors and another		d claim:	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Augusta Health Care For Women Last 4 digits of account number Po Box 7090 Charlottesville, VA 22906 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Augusta Health Care For Women 0011 \$73.00 When was the debt incurred? Opened 03/16 As of the date you file, the claim is: Check all that apply Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare					
Collection Attorney Augusta Health Care For Women Yes		Is the claim subject to offset?	report as priority claims		
Yes		■ No	·		
Valley Credit Service Last 4 digits of account number 0011 \$73.00		Yes	■ Other. Specify Collection In For Women	Attorney Augusta Health Care	
When was the debt incurred? Opened 03/16 Charlottes ville, VA 22906 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? Opened 03/16 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare			Last 4 digits of account number	0011	\$73.00
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare		Po Box 7090	When was the debt incurred?	Opened 03/16	
Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ Disputed □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare			As of the date you file, the claim i	is: Check all that apply	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Blue Ridge Footcare**			As of the date you me, the dam's	S. Official and apply	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Collection Attorney Blue Ridge Footcare		■ Debtor 1 only	☐ Contingent		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare		Debtor 2 only			
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Collection Attorney Blue Ridge Footcare		-	<u> </u>		
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare			•	d claim:	
debt Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare			☐ Student loans		
■ No □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Blue Ridge Footcare				ration agreement or divorce that you did not	
Collection Attorney Blue Ridge Footcare		<u> </u>	<u></u>	g plans, and other similar debts	
		□Yes		Attorney Blue Ridge Footcare	

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	or 1 Jeremy Wayne Reter Jennifer Lynn Reter		Case number (if known)	
4.5	Wells Fargo Bank	Last 4 digits of account number	1074	\$124.00
	Nonpriority Creditor's Name		Opened 09/16 Last Active	
	Credit Bureau Dispute Resoluti Des Moines, IA 50306	When was the debt incurred?	10/03/17	_
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	☐ Yes	Other. Specify Credit Lin	e Secured	_
Part :	List Others to Be Notified About a D this page only if you have others to be notified ying to collect from you for a debt you owe to	d about your bankruptcy, for a debt that	you already listed in Parts 1 or 2. For exam	aple, if a collection agency
have	e more than one creditor for any of the debts t fied for any debts in Parts 1 or 2, do not fill ou	hat you listed in Parts 1 or 2, list the add		
	and Address	On which entry in Part 1 or Part 2 did yo		
	usta Health Iedical Center Drive		Part 1: Creditors with Priority Unsecured Cl	
	ersville, VA 22939		Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number		
Aug	and Address usta Health Care Inc Box 79847		u list the original creditor? Part 1: Creditors with Priority Unsecured Cl. Part 2: Creditors with Nonpriority Unsecure	
	imore, MD 21279	Last 4 digits of account number	■ Part 2. Creditors with Nonphority Unsecure	u Claims
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Blue	Ridge Footcare & Surgery PLC	' '.	Part 1: Creditors with Priority Unsecured Cl	aims
	rossing Lane #105	1	Part 2: Creditors with Nonpriority Unsecure	d Claims
Lexi	ngton, VA 24450	Last 4 digits of account number		
Nama	and Address	On which entry in Part 1 or Part 2 did yo	utiliet the original creditor?	
	lion Clinic		\square Part 1: Creditors with Priority Unsecured Cl	aims
	Box 13966	I	Part 2: Creditors with Nonpriority Unsecure	d Claims
Roai	noke, VA 24038	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Caril	lion Franklin Memorial Hospital		☐ Part 1: Creditors with Priority Unsecured Cl	aims
	Floyd Avenue	ı	Part 2: Creditors with Nonpriority Unsecure	d Claims
Koci	ky Mount, VA 24151	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Com	ıcast	•	Part 1: Creditors with Priority Unsecured Cl	aims
	Box 105184	1	Part 2: Creditors with Nonpriority Unsecured	d Claims
Atlal	nta, GA 30348-5184	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	vergent Outsourcing Inc		☐ Part 1: Creditors with Priority Unsecured Cl	aims
	Box 9004	I	Part 2: Creditors with Nonpriority Unsecured	d Claims
Kent	ton, WA 98057-9004	Last 4 digits of account number		

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			11/29/18 12:29P
Debtor 1 Jeremy Wayne Reter Debtor 2 Jennifer Lynn Reter		Case number (if known)	
Name and Address Creditors Collection Service PO Box 21504 Roanoke, VA 24018	On which entry in Part 1 or Part 2 di Line <u>4.9</u> of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Noalloke, VA 24016	Last 4 digits of account number		
Name and Address DirecTV Attn: Bankrupcty Claims PO Box 6550 Greenwood Village, CO 80155-6550	On which entry in Part 1 or Part 2 di Line 4.22 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address DriveTime Roanoke 1354 E. Main Street Salem, VA 24153	On which entry in Part 1 or Part 2 di Line 4.23 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address EyeOne PLC 620 Berkmar Circle Charlottesville, VA 22901	On which entry in Part 1 or Part 2 di Line <u>4.50</u> of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Home IV Care & Nutritional Services 30 Ebco Cir #102 Waynesboro, VA 22980	On which entry in Part 1 or Part 2 di Line 4.8 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Lexington Family Practice	On which entry in Part 1 or Part 2 di Line <u>4.21</u> of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
N	Last 4 digits of account number	I red in the control of the control	
Name and Address Lexington Virginia Emergency Phys PO Box 17571 Baltimore, MD 21297-1571	On which entry in Part 1 or Part 2 di Line 4.7 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
·	Last 4 digits of account number		
Name and Address Lowes Home Centers Inc 1065 Curtis Bridge Road Wilkesboro, NC 28697	On which entry in Part 1 or Part 2 di Line 4.45 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address	On which entry in Part 1 or Part 2 di	d you liet the original creditor?	
Mark D. Kidd, Esq. PO Box 20487 Roanoke, VA 24018	Line 4.18 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address MedExpress Urgent Care Virginia 21504 Timberlake Road Lynchburg, VA 24505	On which entry in Part 1 or Part 2 di Line 4.43 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Penn Foster School 925 Oak Street Scranton, PA 18515	On which entry in Part 1 or Part 2 di Line 4.49 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Progressive Advanced Insurance Co	On which entry in Part 1 or Part 2 di Line <u>4.33</u> of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims	

11/29/18 12:29PM

Debtor 1 Jeremy Wayne Reter Jennifer Lynn Reter		Case number (if known)	
c/o Credit Collection Services Two Wells Avenue Newton, MA 02459		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Newton, MA 02439	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
SCA Credit Services	Line <u>4.39</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
1502 Williamson Road, Ste 100 Roanoke, VA 24012		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Nounche, VA 24012	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Shenandoah Podiatry	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
8782 Cloverdale Road Troutville, VA 24175		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Trouteme, VA 24170	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Sprint	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Attn: Bankruptcy PO Box 7949		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Overland Park, KS 66207-0949			
,	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Verizon Wireless	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 3397 Bloomington, IL 61702		■ Part 2: Creditors with Nonpriority Unsecured Claims	
biodinington, in 01702	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	Total Claim
	6f.	Student loans	6f.	\$	3,922.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	62,627.28
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	66,549.28

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Jeremy Wayne Re	eter		
	First Name	Middle Name	Last Name	
Debtor 2	Jennifer Lynn Re	ter		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF VIRGINIA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Hunt Ridge Associates LLC 5 Office Canter Lane Lexington, VA 24450	Lease for female debtor's residence.
2.2	Thomas James 11241 Franklin Street Ferrum, VA 24088	Lease for male debtor's residence.

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						11/29/18 12:29P
Fill in th	is information to identify your ca	se:				
Debtor 1	Jeremy Wayne Rete	er				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if,	filing) First Name	Middle Name	Last Name			
United S	tates Bankruptcy Court for the:	WESTERN DISTRICT C	OF VIRGINIA			
Case nu	mber					
(if known)						Check if this is an
						amended filing
odebto	dule H: Your Code	also liable for any deb				
ill it out,	re filing together, both are equall and number the entries in the bo ne and case number (if known). A	oxes on the left. Attach	the Additional Page to			
1. D	o you have any codebtors? (If you	ս are filing a joint case, վ	do not list either spouse a	s a codebtor.		
□N	0					
■ Y	es					
	lithin the last 8 years, have you li ona, California, Idaho, Louisiana, N				states an	d territories include
■ N	o. Go to line 3.					
ПΥ	es. Did your spouse, former spouse	, or legal equivalent live	e with you at the time?			
in li: Fori	olumn 1, list all of your codebtors ne 2 again as a codebtor only if th n 106D), Schedule E/F (Official Fo Column 2.	hat person is a guaran	tor or cosigner. Make su	ure you have listed the	credito	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP C	:ode		Column 2: The cred Check all schedules		hom you owe the debt ly:
3.1	Robert Roop, Jr.			■ Schedule D, lin □ Schedule E/F, I □ Schedule G Cars Financial		

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Par 1.	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.	Employment status Occupation Employer's name Employer's address	Debtor 1 ■ Employed □ Not employed Plate Mounter Trinity Packaging Corp 90 Industrial Ave Rocky Mount, VA 24151	Debtor 2 or non-filing spouse ■ Employed □ Not employed Front Desk Clerk Dominion Lodging Inc P O Box 37 Daleville, VA 24083
	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or	Employment status Occupation	■ Employed □ Not employed Plate Mounter	■ Employed □ Not employed Front Desk Clerk
	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed □ Not employed	■ Employed □ Not employed
	Fill in your employment information. If you have more than one job, attach a separate page with information about additional		■ Employed	■ Employed
	Fill in your employment information. If you have more than one job,			_
	Fill in your employment		Debtor 1	Debtor 2 or non-filing spouse
Par	Describe Employment			
Be a supp spou	s complete and accurate as pos olying correct information. If you use. If you are separated and you tha separate sheet to this form.	ssible. If two married peo are married and not filing ar spouse is not filing w	ng jointly, and your spouse is living ith you, do not include information	d Debtor 2), both are equally responsible for gwith you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question
Sc	hedule I: Your Inc	ome		12/1
Of	ficial Form 106I			MM / DD/ YYYY
				A supplement showing postpetition chapter 13 income as of the following date:
(If kn	own)			☐ An amended filing
Cas	e number			Check if this is:
Unit	ed States Bankruptcy Court for the	e: WESTERN DISTRICT	OF VIRGINIA	
(Spoi	tor 2 Jennifer Ly	nn Reter		
Deb	tor 1 Jeremy Wa	yne Reter		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. Calculate gross Income. Add line 2 + line 3.

			non-f	iling spouse
2.	\$	3,160.30	\$	1,489.39
3.	+\$	0.00	+\$_	0.00
4.	\$	3,160.30	\$_	1,489.39

For Debtor 2 or

For Debtor 1

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Deb Deb	tor 1 tor 2	Jeremy Wayne Jennifer Lynn I					C	Case ni	umber (<i>if k</i> i	nown)					
	Con	by line 4 here				4.		For D	Debtor 1	0.20		or Debtor on-filing			
	СОР	y iiile 4 iieie				٦.		Ψ	3, 10	0.30	Ψ		,409.3		
5.	List	all payroll deduct	ions:												
	5a.	Tax, Medicare, a	and Social Security	deductions		5a.		\$	57	6.94	\$		149.5	7	
	5b.	Mandatory cont	ributions for retire	ment plans		5b.		\$		0.00	\$		0.0	0	
	5c.	Voluntary contr	ibutions for retiren	nent plans		5c.		\$	(0.00	\$		0.0	0	
	5d.	Required repayı	ments of retiremen	t fund loans		5d.		\$		0.00	\$		0.0	0	
	5e.	Insurance				5e.		\$	4	1.34	\$		0.0		
	5f.	Domestic suppo	ort obligations			5f.		\$		0.00	\$		0.0	_	
	5g.	Union dues				5g.		\$		0.00	\$		0.0		
	5h.	Other deduction	is. Specify:			5h.	.+	\$		0.00	+ \$		0.0	0_	
6.	Add	I the payroll deduc	ctions. Add lines 5a	a+5b+5c+5d+5e+5f+5	5g+5h.	6.		\$	618	8.28	\$		149.5	7	
7.	Cald	culate total month	ly take-home pay.	Subtract line 6 from I	ine 4.	7.		\$	2,54	2.02	\$	1	,339.8	2	
8.	List 8a.	Net income from profession, or fa Attach a stateme	arm Int for each property Int and necessary bus	nd from operating a and business showir siness expenses, and	ng gross	8a.		\$		0.00	\$		0.0	0	
	8b.	Interest and div				оа. 8b.		\$		0.00 0.00	\$		0.0	_	
	8c.	Family support regularly receive Include alimony,	payments that you	, a non-filing spous	•	8c.		\$ \$		0.00	\$	1	,000.0		
	8d.	Unemployment				8d.		\$		0.00	\$		0.0	_	
	8e.	Social Security	•			8e.		\$		0.00	\$		0.0		
	8f.	Include cash ass that you receive,	istance and the valu	you regularly receive (if known) of any notes (benefits under the using subsidies.	on-cash assistance	8f.		\$		0.00	\$		0.0	0	
	8g.	Pension or retire	ement income			8g.		\$	69	5.00	\$		0.0	0	
	8h.	Other monthly i	ncome. Specify: _\	VA Disability		8h.	+	\$	55	1.00	+ \$		0.0	0	
9.	Add	l all other income.	Add lines 8a+8b+8	sc+8d+8e+8f+8g+8h.		9.	9	<u> </u>	1,24	6.00	\$		1,000.	00	
10	Cald	culate menthly inc	ome. Add line 7 + I	ino O	1	0.	Φ		700 02	+ \$		220.02		-	127.84
10.		•		Debtor 2 or non-filing		0.	Ψ_	ی.	,788.02			2,339.82	- [−] ^Ψ	Ο,	127.04
11.	Stat Inclu	te all other regular ude contributions from the friends or relatives not include any amo	contributions to the community of the contributions to the contribution to the contributi	he expenses that yo rtner, members of yo ed in lines 2-10 or am	u list in Schedule our household, your o	depe					•	n Schedul	e J. +\$ _		0.00
12.		e that amount on th		e 10 to the amount and and statistical									\$Comb	ined	,127.84 I ncome
13.	Doy	you expect an incr	ease or decrease v	within the year after	you file this form?									,	. 30.110
		No.													
		Yes. Explain:	The \$695.00/mo	Pension for male	e debtor goes to	fema	ale	e deb	tor for c	child	sup	port.			

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0.00

Fill	in this inform	ation to identify ye	our case:					
Deb	tor 1	Jeremy Way	ne Reter			Che	eck if this is:	
L.							An amended filing	
	tor 2	Jennifer Lyr	ın Reter				A supplement show 13 expenses as of	ving postpetition chapter
(Spc	ouse, if filing)						10 expenses as of	the following date.
Unite	ed States Banl	cruptcy Court for the	: WESTE	ERN DISTRICT OF VIRGIN	IIA		MM / DD / YYYY	
	e number nown)							
		orm 106J						
		J: Your						12/15
info	ormation. If r	nore space is ne vn). Answer eve	eded, atta ry question	. If two married people ar ch another sheet to this i n.				
Part 1.	Is this a join	ribe Your House int case?	<u>anoia</u>					
	□ No. Go t							
	_	es Debtor 2 live	in a separ	ate household?				
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	btor 2.	
•			_	a	re. Coparato ricaco		2.0	
2.	•	ve dependents?	☐ No					
	Do not list I Debtor 2.	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	a the						□ No
	dependents				Daughter		10	■ Yes
								□ No
					Son		13	■ Yes
								□ No
					Son		15	Yes
								□ No □ Yes
3.	expenses of yourself ar	penses include of people other t nd your depende	ents?	No Yes				Li res
exp	imate your e	a date after the	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a s J, check	supplement in a Cha the box at the top o	apter 13 case to report f the form and fill in the
				government assistance it				
	value of sud ficial Form 1		d have inc	cluded it on Schedule I: Y	our Income		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgage	e 4.	\$	520.00
	If not inclu	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner'	s, or renter	's insurance		4b.	·	0.00
	4c. Hom	e maintenance, re	epair, and υ	ıpkeep expenses		4c.	\$	0.00

4d. Homeowner's association or condominium dues

Additional mortgage payments for your residence, such as home equity loans

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		Jeremy Wayne Reter Jennifer Lynn Reter Ca	ase num	ber (if known)	
6.	Utilitie	es:			
	6a.	Electricity, heat, natural gas	6a.	\$	100.00
	6b.	Water, sewer, garbage collection	6b.	\$	22.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	70.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	and housekeeping supplies	_ 7.	\$	300.00
8.	Childe	care and children's education costs	8.	\$	0.00
9.	Clothi	ing, laundry, and dry cleaning	9.	\$	30.00
10.	Perso	nal care products and services	10.	\$	40.00
11.	Medic	al and dental expenses	11.	\$	0.00
12.	Trans	portation. Include gas, maintenance, bus or train fare.			050.00
		t include car payments.	12.	· .	250.00
		tainment, clubs, recreation, newspapers, magazines, and books	13.	·	50.00
14.	Chari	table contributions and religious donations	14.	\$	0.00
15.	Insura Do no	ance. t include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	\$	0.00
		Health insurance	15b.	· -	0.00
		Vehicle insurance	15c.	·	190.00
		Other insurance. Specify:	15d.	·	0.00
16		Do not include taxes deducted from your pay or included in lines 4 or 20.	_ 100.	Ψ	0.00
10.		y: Personal Property Taxes	16.	\$	10.00
17.		Iment or lease payments:	_		_
	17a.	Car payments for Vehicle 1	17a.	\$	300.00
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
	17c.	Other. Specify:	17c.	\$	0.00
	17d.	Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	- 18.	\$	1,000.00
19.		payments you make to support others who do not live with you.		\$	0.00
	Specif	*	_ 19.		
20.		real property expenses not included in lines 4 or 5 of this form or on Schedu			
		Mortgages on other property	20a.	·	0.00
		Real estate taxes	20b.	·	0.00
		Property, homeowner's, or renter's insurance	20c.	· -	0.00
		Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other	: Specify: Miscellaneous Expenses	21.	+\$	50.00
	Gifts	: Family, Birthdays, Christmas	_	+\$	25.00
22.	Calcu	late your monthly expenses			
		Add lines 4 through 21.		\$	2,957.00
	22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,158.41
	22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	6,115.41
23.	Calcu	late your monthly net income.			
_0.		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	6,127.84
		Copy your monthly expenses from line 22c above.	23b.	·	6,115.41
	200.	copy your monany expenses non-mile 225 above.	200.		0,110.41
	23c.	Subtract your monthly expenses from your monthly income.	00-	¢	12.43
		The result is your monthly net income.	23c.	\$	12.43
24.	For exa	by expect an increase or decrease in your expenses within the year after you to ample, do you expect to finish paying for your car loan within the year or do you expect your mortant of the terms of your mortgage?			or decrease because of a
	■ No				
	☐ Ye	s. Explain here:			

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Debto Debto	or 1 J or 2 J or 2	eremy Wayne Ret ennifer Lynn Rete	er er		Case numbe	r (if known)	
Fill in	this info	ormation to identify yo	our case:				
Debto	r 1	Jeremy Way	no Potor		Check if	this is:	
Dobio		Jeremy Way	ne neter			amended filing	
Debto (Spou	r 2 se, if filing	Jennifer Lyn	n Reter			upplement showing enses as of the follo	postpetition chapter 13 owing date:
United	d States E	Bankruptcy Court for the	WESTERN DISTRICT OF VIRGIN	NIA	MM	/ DD / YYYY	
Case (If kno	number own)						
		Form 106J-		avata Hassa	ا ا م ا ما ما	of Dobton	
Use to Debt form spac Answ	this forn for 2 hav only wi e is nee ver ever	m for Debtor 2's sep ye one or more dep ith respect to expen eded, attach another ry question.	arate household expenses ONLY endents in common, list the depenses for Debtor 2 that are not report sheet to this form. On the top of a	IF Debtor 1 and Debt adents on both Sched rted on Schedule J.	tor 2 maint dule J and Be as com	ain separate hous this form. Answer	eholds. If Debtor 1 and er the questions on this e as possible. If more
Part '	D.	escribe Your House	enoia				
	י ב	and Debtor 1 maint No. Do not complete Yes	ain separate households? this form.				
2.	Do you	have dependents?	□ No				
	list all ot depende regardle	ents of Debtor 2 ess of whether a dependent or 1 on	■ Yes. Fill out this information for each dependent	Dependent's relatio Debtor 2	onship to	Dependent's age	Does dependent live with you?
	Do not s depende	state the ents names.		Daughter		10	□ No ■ Yes
							□ No
				Son		13	■ Yes
	•						□ No
				Son		15	Yes
	•						□ No □ Yes
	expense	r expenses include es of people other t f and your depende					
Part 2 Estin			ng Monthly Expenses our bankruptcy filing date unless y	you are using this fo	rm as a su	pplement in a Cha	pter 13 case to report
expe	nses as	of a date after the	bankruptcy is filed.				
			non-cash government assistance i cluded it on <i>Schedule I: Your Incor</i>			our expenses	
		tal or home owners ts and any rent for th	hip expenses for your residence. I e ground or lot.	Include first mortgage	4. \$	i	740.00
	If not in	cluded in line 4:					
	4a. R	eal estate taxes			4a. \$;	0.00
	4b. Pi	roperty, homeowner's	s, or renter's insurance		4b. \$		0.00
	4c. H	ome maintenance, re	pair, and upkeep expenses		4c. \$	·	0.00

Deb Deb	tor 1 tor 2	Jeremy Wayne Reter Jennifer Lynn Reter	Case num	ber (if known)	
	4d.	Homeowner's association or condominium dues	4d.	\$	0.00
5.	Addi	itional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilit 6a.	ties: Electricity, heat, natural gas	6a.	\$	125.00
	6b.	Water, sewer, garbage collection	6b.	·	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	200.00
	6d.	Other. Specify: <i>Cable</i>	6d.	·	60.00
7.		d and housekeeping supplies	7.	·	
7. 8.		dcare and children's education costs	7. 8.	\$	900.00 45.00
o. 9.	_	hing, laundry, and dry cleaning	9.	\$	
					50.00
		conal care products and services	10.	·	50.00
11.		ical and dental expenses	11.	\$	45.00
12.		sportation. Include gas, maintenance, bus or train fare.	12.	\$	250.00
13		ot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13.	· -	50.00
14.		ritable contributions and religious donations	14.	·	0.00
		•	14.	Φ	0.00
15.		rance. ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	\$	0.00
		Health insurance	15b.	·	0.00
		Vehicle insurance	15c.	·	100.00
		Other insurance. Specify:	15d.	·	0.00
16		es. Do not include taxes deducted from your pay or included in lines 4 or 20.	13u.	Ψ	0.00
10.		cify: Personal Property Taxes	16.	\$	11.25
17.		allment or lease payments:		· -	
		Car payments for Vehicle 1	17a.	\$	457.16
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
		Other. Specify:	17c.	\$	0.00
18.		r payments of alimony, maintenance, and support that you did not report as			
		ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Othe	er payments you make to support others who do not live with you.		\$	0.00
	Spec	sify:	19.		_
20.		er real property expenses not included in lines 4 or 5 of this form or on Sche			
	20a.	Mortgages on other property	20a.	·	0.00
	20b.	Real estate taxes	20b.	\$	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	er: Specify: Miscellaneous Expenses	21.	+\$	50.00
	Gift	s: Christmas, Family, Birthdays		\$	25.00
22	Valu	r monthly expenses. Add lines 5 through 21.		\$	3 159 41
22 .	The	result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedu late the total expenses for Debtor 1 and Debtor 2.	le J to	Ψ	3,158.41
22	Lina	not used on this form.			
-			file their	· farm?	
24 .	For e	You expect an increase or decrease in your expenses within the year after your xample, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			or decrease because of a
	■ N				

■ No.	
☐ Yes.	Explain here:

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Fill in t	his informa	tion to identify your	case:	
Debtor				
Debloi	١ .	Jeremy Wayne R First Name	Middle Name Last Name	
Debtor	2	Jennifer Lynn Re		
(Spouse if		First Name	Middle Name Last Name	
United \$	States Bankı	ruptcy Court for the:	WESTERN DISTRICT OF VIRGINIA	
Case nu	umber			Chack if this is an
(ii kilowii)				☐ Check if this is an amended filing
ou mus	st file this fo	orm whenever you fi		
	Sign B	Below		
Die	d you pay o	or agree to pay some	one who is NOT an attorney to help you fill out bar	nkruptcy forms?
	No			
	Yes. Nar	me of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
				Deciaration, and Signature (Official Point 119)
		of perjury, I declare rue and correct.	that I have read the summary and schedules filed	with this declaration and
Х	/s/ Jerem	ny Wayne Reter	X /s/ Jennifer I	Lynn Reter
		Wayne Reter	Jennifer Lyn	
	Signaturo		Ciamatum at D	
	Signature	of Debtor 1	Signature of De	

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Debtor 1	Jeremy Wayne R	eter		
	First Name	Middle Name	Last Name	
Debtor 2	Jennifer Lynn Re		Lock None	
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF VIR	RGINIA	
Case number _				
f known)				☐ Check if this is an amended filing
Official Fo	rm 107			
		Affairs for Individua	als Filing for Bankruptcy	4/1
formation. If multiple if the second in the	ore space is needed, a n). Answer every ques	attach a separate sheet to this	lling together, both are equally responsit form. On the top of any additional pages	
-	r current marital status		Su Boloto	
.				
■ Married	ried			
☐ Not mai				
☐ Not mai		ived anywhere other than whe	re you live now?	
☐ Not mai		ived anywhere other than whe	re you live now?	
□ Not man	ast 3 years, have you I	ived anywhere other than whe		
□ Not man During the I □ No ■ Yes. Lis	ast 3 years, have you I	•		Dates Debtor 2 lived there
□ Not man During the I □ No ■ Yes. Lis Debtor 1 Pr 95 Bound	ast 3 years, have you I	ved in the last 3 years. Do not inc Dates Debtor 1	Debtor 2 Prior Address: Same as Debtor 1	
□ Not man During the I □ No ■ Yes. Lis Debtor 1 Pr 95 Bound	ast 3 years, have you I t all of the places you liv ior Address: ary Line Lane	ved in the last 3 years. Do not inc Dates Debtor 1 lived there From-To:	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	lived there ■ Same as Debtor 1 From-To:
□ Not man During the I □ No ■ Yes. Lis Debtor 1 Pr 95 Bound	ast 3 years, have you I t all of the places you liv ior Address: ary Line Lane	Dates Debtor 1 lived there From-To: 7/30/15 - 12/16/17	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1 Or Trot Lane	lived there ■ Same as Debtor 1 From-To:
□ Not man During the I □ No ■ Yes. Lis Debtor 1 Pr 95 Bound	ast 3 years, have you I t all of the places you liv ior Address: ary Line Lane	Dates Debtor 1 lived there From-To: 7/30/15 - 12/16/17	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	lived there ■ Same as Debtor 1 From-To: □ Same as Debtor 1 From-To:
□ Not man During the I □ No ■ Yes. Lis Debtor 1 Pr 95 Bound	ast 3 years, have you I t all of the places you liv ior Address: ary Line Lane	Dates Debtor 1 lived there From-To: 7/30/15 - 12/16/17	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1 20 Trot Lane Apt B	lived there ■ Same as Debtor 1 From-To: □ Same as Debtor 1 From-To:

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Check all that apply. (before deductions and Check all that apply. (before	income deductions clusions) \$2,349.23
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Operating a business For last calendar year: (January 1 to December 31, 2017) Wages, commissions, bonuses, tips Operating a business	income deductions clusions) \$2,349.23
Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Operating a business For last calendar year: (January 1 to December 31, 2017) For the calendar year before that: (January 1 to December 31, 2016) Wages, commissions, bonuses (January 1 to December 31, 2016) Wages, commissions, bonuses (January 1 to December 31, 2016) Wages, commissions, bonuses (January 1 to December 31, 2016) Wages, commissions, bonuses (January 1 to December 31, 2016) Wages, commissions, January 1 to December 31, 2016) Wages, commissions, January 1 to December 31, 2016)	deductions clusions) \$2,349.23
Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Sources of income Check all that apply. Sources of inc	deductions clusions) \$2,349.23
Check all that apply. (before deductions and exclusions) \$11,756.98 Wages, commissions, bonuses, tips Operating a business For last calendar year: (January 1 to December 31, 2017) Wages, commissions, bonuses, tips Operating a business \$35,600.00 Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2016) Wages, commissions, bonuses, tips	deductions clusions) \$2,349.23
the date you filed for bankruptcy: Wages, commissions, bonuses, tips Departing a business	
For last calendar year: (January 1 to December 31, 2017) Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Wages, commissions, \$40,999.92 Wages, commissions,	\$449.00
(January 1 to December 31, 2017) Wages, commissions, bonuses, tips □ Operating a business □ Operating a business ■ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips □ Operating a business ■ Wages, commissions, bonuses, tips □ Operating a business ■ Wages, commissions, wages, commissions, bonuses, tips	\$449.00
For the calendar year before that: (January 1 to December 31, 2016) Wages, commissions, \$40,999.92 Wages, commissions,	
(January 1 to December 31, 2016)	
: 1	\$0.00
☐ Operating a business ☐ Operating a business	
winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes, Fill in the details.	
Describe below. each source Describe below. (before	income deductions clusions)
From January 1 of current year until the date you filed for bankruptcy: Gross Distributions \$7,645.00 from Pension	
VA Disability Income \$6,061.00	
\$0.00 Child Support	\$11,000.00
For last calendar year: Gross Distributions \$9,079.00 from Pension	
VA Disability Income \$6,612.00	
\$0.00 Child Support	\$3,000.00
For the calendar year before that: Gross Distributions \$8,977.00 from Pension	

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			remy Way nnifer Lyn					C	case number (if known)		
					Debtor 1 Sources Describe	of income	each	s income from source e deductions and	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
					VA Disa	ability Income	CACIGO	\$6,612.0	0		
				•		ore You Filed for	•	tcy			
6.	_	t her 0.	Neither De	ebtor 1 nor	Debtor 2 ha	rimarily consume as primarily conso family, or househo	umer deb		ebts are defined in 1°	I U.S.C. § 1	01(8) as "incurred by an
			During the No.	Go to line	7. each credit	or to whom you pa	id a total	of \$6,425* or moi		yments and	the total amount you
			* Subject	not include	payments	to an attorney for t	his bankr	uptcy case.	bligations, such as c on or after the date o	• • •	and alimony. Also, do
	■ Y	es.				ve primarily consu			otal of \$600 or more	?	
			■ No.	Go to line	7.						
			☐ Yes	include pa	yments for o				and the total amount upport and alimony.		at creditor. Do not t include payments to an
	Credi	tor's	s Name and	d Address		Dates of payme	ent	Total amount paid	•	Was this	payment for
7.	Insider of whic	s inc h yo ness	clude your r ou are an of	elatives; any ficer, directo	general par, person in	artners; relatives of control, or owner	any gene of 20% or	ral partners; part more of their vot		ou are a gen ny managin	eral partner; corporations g agent, including one for
	■ N		_ist all payn	nents to an i	nsider.						
	Inside	er's	Name and	Address		Dates of payme	ent	Total amount paid	Amount you still owe	Reason	or this payment
8.	Within inside	-	ear before	you filed fo	r bankrupt	cy, did you make	any payn	nents or transfe	r any property on a	ccount of a	debt that benefited an
			yments on o	debts guarar	iteed or cos	signed by an inside	er.				
	■ N		iot all nave	aanta ta an ir	a a i d a u						
			Name and	nents to an ii Address	nsider	Dates of payme	ent	Total amount			for this payment
Da	w. 4.	سماما	4ifu Lagal	Astions Bo		no and Faradaa		paid	still owe	include c	reditor's name
9.	Within List all	1 y suc	ear before h matters, i	you filed fo	r bankrupt sonal injury		rty in any		action, or administ tion suits, paternity a		
	□ N		Fill in the de	etails.							
	Case Case	title				Nature of the ca	ase	Court or agend	су	Status of	f the case

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Jeremy Wayne Reter Debtor 1 Jennifer Lynn Reter Debtor 2 Case number (if known) Case title Nature of the case Court or agency Status of the case Case number Sterling Properties & Managment Sommons For Lexington/Rockbridge Pending v. Jeremy Wayne Reter and **Unlawful Detainer District Courts** □ On appeal Jennifer Lynn Reter 20 S Randolph St Ste 200 Concluded Lexington, VA 24450 Sterling Properties & Managment v Warrant in Debt Lexington/Rockbridge ☐ Pending Jeremy Wayne Reter and Jennifer **District Courts** ☐ On appeal Lynn Reter 20 S Randolph St Ste 200 Concluded Lexington, VA 24450 Hunt Ridge Associates LLC v Sommons For Lexington/Rockbridge □ Pending Unlawful Detainer Jennifer Lynn Reter **District Courts** ☐ On appeal 20 S Randolph St Ste 200 Concluded Lexington, VA 24450 Sterling Properties & Managment v Garnishment Lexington/Rockbridge Pending Jennifer Lynn Reter **District Courts** Summons ☐ On appeal GV17001037-01 20 S Randolph St Ste 200 ☐ Concluded Lexington, VA 24450 Return Date 4/22/19 Garnishment Lexington/Rockbridge GAD Finance Inc v Jeremy Wayne Pending **District Courts** Reter Summons □ On appeal 20 S Randolph St Ste 200 GV15005600-02 ☐ Concluded Lexington, VA 24450 Return Date 3/6/19 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ☐ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property Date** Value of the property Explain what happened **GAD Finance Inc** 9/24/18 \$1,189.02 Wages c/o Mark D. Kidd P O Box 20487 ☐ Property was repossessed. Roanoke, VA 24018 ☐ Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied. Sterling Properties & Managment 10/22/18 \$190.00 Wages 21 W Nelson Street Lexington, VA 24450 ☐ Property was repossessed. ☐ Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied.

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	otor 1 Jeremy Wayne Reter otor 2 Jennifer Lynn Reter		Case number	(if known)	
11.	Within 90 days before you filed accounts or refuse to make a p No Yes. Fill in the details.		did any creditor, including a bank or financial in	stitution, set off any a	amounts from your
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
	Within 1 year before you filed f court-appointed receiver, a cus ■ No □ Yes		vas any of your property in the possession of an eler official?	assignee for the bene	efit of creditors, a
Par	t 5: List Certain Gifts and Co	ntributions			
13.	Within 2 years before you filed ■ No □ Yes. Fill in the details for ea		did you give any gifts with a total value of more t	han \$600 per person?	?
	Gifts with a total value of more per person Person to Whom You Gave the		Describe the gifts	Dates you gave the gifts	Value
14.	Address: Within 2 years before you filed ■ No □ Yes. Fill in the details for ea		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to chari more than \$600 Charity's Name Address (Number, Street, City, State		Describe what you contributed	Dates you contributed	Value
Par	List Certain Losses				
15.	or gambling?	or bankruptcy o	r since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	☐ Yes. Fill in the details. Describe the property you los how the loss occurred	Includ	ribe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t7: List Certain Payments or	Transfers			
	consulted about seeking bankı	uptcy or prepari	id you or anyone else acting on your behalf pay oing a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Paymer	nt, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Michael D. Hart, P.C. Post Office Box 622 Roanoke, VA 24004 service@hartlawroanoke.c	eom	Attorney Fees	10/17/18 \$1,095.00 10/30/18 \$615.00	\$1,255.00

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Debtor 2 Jennifer Lynn Reter Case number (if known) 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No П Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ☐ Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code)

Debtor 1

Jeremy Wayne Reter

	otor 1 Jeremy Wayne Reter otor 2 Jennifer Lynn Reter		Case number (if known)	
Pai	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust
	<u></u>			
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	t 10: Give Details About Environmental Inform	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su Site means any location, facility, or property as	air, land, soil, surface water, ground bstances, wastes, or material.	dwater, or other medium, including s	tatutes or
_	to own, operate, or utilize it, including disposal	-	, , , , , , , , , , , , , , , , , , , ,	
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No			
	Yes. Fill in the details.	Q	Fording was a fall board for a second	Data of matter
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	strative proceeding under any envi	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11: Give Details About Your Business or Cor			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	v business?
	☐ A sole proprietor or self-employed in a	•	,	y buomicos.
	☐ A member of a limited liability company	•	·	
	☐ A partner in a partnership	, (===) =:	··r \ /	
	☐ An officer, director, or managing execu	tive of a corporation		
	☐ An owner of at least 5% of the voting or	•		
	or at loads 0 /0 or the folling of	gang coominion of a corporation		

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	otor 1 Jeremy Wayne Reter otor 2 Jennifer Lynn Reter	Ca	ase number (if known)
	No. None of the above applies. Go to FYes. Check all that apply above and fill	Part 12. in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement to a	nyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
I ha		false statement, concealing property, or o	declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both.
Je	Jeremy Wayne Reter remy Wayne Reter nature of Debtor 1	/s/ Jennifer Lynn Reter Jennifer Lynn Reter Signature of Debtor 2	
Dat	November 29, 2018	Date November 29, 2018	
Did ■ N		ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
■ N	you pay or agree to pay someone who is not lo 'es. Name of Person Attach the <i>Bankru</i>	, ,,	

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Debtor 1				
200101	Jeremy Wayne Reter	Middle Name	Last Name	
Debtor 2	Jennifer Lynn Reter	imadic Haine	233.14.110	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the: WE	ESTERN DISTRICT C	DF VIRGINIA	
Case number (if known)				☐ Check if this is an amended filing
Official Fo Statemer		for Individu	ıals Filing Under Chapt	er 7 12/15
If vou are an indi	ividual filing under chapter	7. vou must fill out tl	his form if:	
	e claims secured by your pr	, •		
You must file thi	ever is earlier, unless the co	30 days after you fi	ired. le your bankruptcy petition or by the date s for cause. You must also send copies to th	
	eople are filing together in a	joint case, both are	equally responsible for supplying correct i	information. Both debtors must
	and accurate as possible. If our name and case number		ed, attach a separate sheet to this form. Or	the top of any additional pages,
write y		(if known).	ed, attach a separate sheet to this form. Or	the top of any additional pages,
Part 1: List You	our name and case number our Creditors Who Have Sec ors that you listed in Part 1	(if known).	ed, attach a separate sheet to this form. Or	
Part 1: List You 1. For any creditinformation be	our name and case number our Creditors Who Have Sec ors that you listed in Part 1	(if known). cured Claims of Schedule D: Cred s collateral What	· ·	ty (Official Form 106D), fill in the
Part 1: List You 1. For any credit information be Identify the cre	our name and case number our Creditors Who Have Sec ors that you listed in Part 1 elow.	(if known). cured Claims of Schedule D: Cred s collateral What sec	litors Who Have Claims Secured by Propert	ty (Official Form 106D), fill in the
Part 1: List You 1. For any creditinformation be Identify the cre Creditor's 4 name:	our name and case number our Creditors Who Have Secons that you listed in Part 1 elow. editor and the property that is a light of the second	of Schedule D: Cred	litors Who Have Claims Secured by Propert at do you intend to do with the property that ures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	ty (Official Form 106D), fill in the It Did you claim the property as exempt on Schedule C?
Part 1: List You 1. For any credition be Identify the creditor's 4	our name and case number our Creditors Who Have Sec ors that you listed in Part 1 elow. editor and the property that is 0 West Auto Sales, Inc. 2002 GMC Sierra 1500 miles	(if known). cured Claims of Schedule D: Cred s collateral What sec	litors Who Have Claims Secured by Propert at do you intend to do with the property that ures a debt? Surrender the property. Retain the property and redeem it.	ty (Official Form 106D), fill in the Did you claim the property as exempt on Schedule C?
Part 1: List You 1. For any credition of Identify the creditor's Aname: Description of property securing debt:	our name and case number our Creditors Who Have Sec ors that you listed in Part 1 elow. editor and the property that is 0 West Auto Sales, Inc. 2002 GMC Sierra 1500 miles	of Schedule D: Cred Scollateral What sec	litors Who Have Claims Secured by Propertat do you intend to do with the property that ures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	by (Official Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes
Part 1: List You 1. For any credition of Identify the creditor's 4 name: Description of property securing debt: Creditor's Credit	our name and case number our Creditors Who Have Sectors that you listed in Part 1 elow. editor and the property that is 40 West Auto Sales, Inc. 2002 GMC Sierra 1500 miles	(if known). cured Claims of Schedule D: Cred s collateral What sec	litors Who Have Claims Secured by Propert at do you intend to do with the property tha ures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a	by (Official Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes
Part 1: List You 1. For any credition of Identify the creditor's and the Identify the	our name and case number our Creditors Who Have Sectors that you listed in Part 1 elow. editor and the property that is 10 West Auto Sales, Inc. 2002 GMC Sierra 1500 miles Cars Financial 2013 Kia Sorento 145,6	of Schedule D: Cred s collateral 165,000 Green G	litors Who Have Claims Secured by Properts at do you intend to do with the property that ures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it.	by (Official Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes
Part 1: List You 1. For any credition of Identify the creditor's Aname: Description of property securing debt: Creditor's Coname: Description of property securing debt:	our name and case number our Creditors Who Have Sectors that you listed in Part 1 elow. editor and the property that is 10 West Auto Sales, Inc. 2002 GMC Sierra 1500 miles Cars Financial 2013 Kia Sorento 145,6	(if known). cured Claims of Schedule D: Cred s collateral What sec 165,000	litors Who Have Claims Secured by Propert at do you intend to do with the property tha ures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	by (Official Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

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			/ayne Reter Lynn Reter			Case number (if known)	
Les	sor's na	me:	Hunt Ridge Associates LL	С				l No
							-	Yes
	cription perty:	of leased	Lease for female debtor's i	residence.				
Les	sor's na	me:	Thomas James					l No
							-	l _{Yes}
	cription perty:	of leased	Lease for male debtor's res	sidence.				
Par	3: S	ign Below						
			ry, I declare that I have indicate tt to an unexpired lease.	d my intention abou	ıt any	y property of my estate that so	ecur	es a debt and any personal
X	/s/ Je	remy Way	ne Reter	x	/s/	Jennifer Lynn Reter		
		ny Wayne				nnifer Lynn Reter		
	Signat	ure of Debto	or 1		Sigi	nature of Debtor 2		
	Date	Novem	nber 29, 2018	Da	ite	November 29, 2018		

Fill in this infor	rmation to identify your case:	Check one box only as directed in this form and in Form
Debtor 1 Jeremy Wayne Reter		122A-1Supp:
Debtor 2 Spouse, if filing)	Jennifer Lynn Reter	1. There is no presumption of abuse
United States Case number	Bankruptcy Court for the: Western District of Virginia	 □ 2. The calculation to determine if a presumption of abus applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
if known)		☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
		☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1.	What is your marital and filing status? Check one only.
	□ Not married. Fill out Column A, lines 2-11.
	■ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
	☐ Married and your spouse is NOT filing with you. You and your spouse are:
	☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

□ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Column B

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					Debt	or 1	 or 2 or filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and co	mmissio	ons (before all	\$	1,403.80	\$ 167.34
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payme	nts from	a spouse if	\$	0.00	\$ 1,000.00
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Includ I, your	e regular depende	contributions nts, parents,	\$	0.00	\$ 0.00
5.	Net income from operating a business, profession,	or farn	n				
			Deb	tor 1			
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$	0.00				
	Net monthly income from a business, profession, or farr	m \$	0.00	Copy here ->	\$	0.00	\$ 0.00
6.	Net income from rental and other real property						
			Deb	tor 1			
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	- \$	0.00				
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$ 0.00
7.	Interest, dividends, and royalties				\$	0.00	\$ 0.00

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nemployment compensation onot enter the amount if you contend that the amount received was a benefit under e Social Security Act. Instead, list it here: For you \$ 0.00\$ For your spouse \$ 0.00\$ ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act. come from all other sources not listed above. Specify the source and amount.	Column Debtor		Column B Debtor 2 onon-filing	or
not enter the amount if you contend that the amount received was a benefit under a Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act.	Debtor \$	1	Debtor 2 on non-filing	or
not enter the amount if you contend that the amount received was a benefit under a Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act.	\$		non-filing	
not enter the amount if you contend that the amount received was a benefit under a Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act.	· —	0.00		spouse
onot enter the amount if you contend that the amount received was a benefit under a Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act.	· —	0.00	•	
Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act.	er		\$	0.00
For you \$ 0.00 For your spouse \$ 0.00 ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act.				
For your spouse \$ 0.00 ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act.				
ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act.				
,	\$	695.00	\$	0.00
	<u> </u>			
o not include any benefits received under the Social Security Act or payments ceived as a victim of a war crime, a crime against humanity, or international or mestic terrorism. If necessary, list other sources on a separate page and put the al below.				
· VA Disability	\$	551.00	\$	0.00
	\$	0.00	\$	0.00
Total amounts from congrate pages, if any	<u> </u>		¢	
Total amounts from separate pages, if any.	+ \$	0.00	Φ	0.00
alculate your total current monthly income. Add lines 2 through 10 for ch column. Then add the total for Column A to the total for Column B.	2,649.8	<u>o</u> +	1,167.34	= \$ 3,817.
Determine Whether the Means Test Applies to You Ilculate your current monthly income for the year. Follow these steps:				income
	_		_	
a. Copy your total current monthly income from line 11		copy line 11	nere=>	\$\$
M 10 1 1 40 (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Multiply by 12 (the number of months in a year)				x 12
b. The result is your annual income for this part of the form			12	2b. \$ 45,805.
alculate the median family income that applies to you. Follow these steps:				
I in the state in which you live.				
I in the number of people in your household.				
l in the median family income for your state and size of household.			13	3. _{\$} 111,151.
find a list of applicable median income amounts, go online using the link specified	d in the se	parate instruc		Ψ
this form. This list may also be available at the bankruptcy clerk's office.	·			
ow do the lines compare?				
a. Line 12b is less than or equal to line 13. On the top of page 1, check bo	ox 1, There	is no presun	าption of abu	ise.
Go to Part 3. b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The p</i>	presumptio	n of abuse is	determined i	by Form 122A-2.
Go to Part 3 and fill out Form 122A-2. Sign Below				
By signing here, I declare under penalty of perjury that the information on this s	statement a	and in any att	achments is	true and correct
27 organing hore, i decide and or pendity or perjury that the information on this s	AGIOTTOTIL C	and in any all	20111101110 10	and died correct.
X /s/ Jeremy Wayne Reter X /s/ Jer				
	fer Lynn			
Signature of Debtor 1 Signature	ire of Debt	or 2		
November 29, 2018 Date November 29, 2018	<i>nber 29, 1</i> D / YYYY			
MM / DD / YYYY MM / D				
MM / DD / YYYYY MM / DI If you checked line 14a, do NOT fill out or file Form 122A-2.				

Jeremy Wayne Reter

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u>	<u>\$15</u>	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-71604 Doc 1 Filed 11/29/18 Entered 11/29/18 12:31:39 Desc Main Document Page 66 of 74

B2030 (Form 2030) (12/15)

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United States Bankruptcy Court Western District of Virginia

In	re	Jeremy Wayne Reter Jennifer Lynn Reter		Case No.		
	-	Jennier Lynn Reter	Debtor(s)	Chapter	7	
		DISCLOSURE OF COMPE	ENSATION OF ATTOR	NEY FOR D	EBTOR(S)	
1.	con	suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 npensation paid to me within one year before the fil rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy, o	or agreed to be paid	to me, for services render	red or to
		For legal services, I have agreed to accept		\$	1,255.00	
		Prior to the filing of this statement I have received			1,255.00	
		Balance Due		\$	0.00	
2.	\$	335.00 of the filing fee has been paid.				
3.	The	e source of the compensation paid to me was:				
		■ Debtor □ Other (specify):				
4.	The	e source of compensation to be paid to me is:				
		■ Debtor □ Other (specify):				
5.	•	I have not agreed to share the above-disclosed com-	npensation with any other person u	nless they are men	bers and associates of my	law firm.
		I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the n				irm. A
5.	In 1	return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy	case, including:	
	b. c.	Analysis of the debtor's financial situation, and reno Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on h	atement of affairs and plan which a tors and confirmation hearing, and reduce to market value; exer- tions as needed; preparation of	may be required; I any adjourned heam ption planning	arings thereof; ; preparation and filing	g of
7.	Ву	agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding.	ee does not include the following	service: ial lien avoidand	es, relief from stay ac	tions or
			CERTIFICATION			
this		ertify that the foregoing is a complete statement of a kruptcy proceeding.	ny agreement or arrangement for p	payment to me for	representation of the debto	r(s) in
	Nov	rember 29, 2018	/s/ Bryan James P	almer		
	Date		Bryan James Paln	ner		•
			Signature of Attorney Michael D. Hart, P			
			Post Office Box 62	22		
			Roanoke, VA 2400 540 342-9736 Fax			
			service@hartlawre			
			Name of law firm			

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United States Bankruptcy Court Western District of Virginia

_	Jeremy Wayne Reter		
In re	Jennifer Lynn Reter		Case No.
		Debtor(s)	Chapter 7
	VERI	FICATION OF CREDITOR	R MATRIX
The ab	ove-named Debtors hereby verify the	at the attached list of creditors is true and	correct to the best of their knowledge.
Date:	November 29, 2018	/s/ Jeremy Wayne Reter	
Dutc.		Jeremy Wayne Reter	
		Signature of Debtor	
Date:	November 29, 2018	/s/ Jennifer Lynn Reter	
		Jennifer Lynn Reter	
		Signature of Debtor	

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Reter, Jeremy and Jennifer -

40 WEST AUTO SALES, INC. 11241 FRANKLIN STREET FERRUM, VA 24088

ADVANCE AMERICA 172 WALKER STREET LEXINGTON, VA 24450

AMER FST FIN 7330 W. 33RD STREET WICHITA, KS 67205

AUGUSTA HEALTH
78 MEDICAL CENTER DRIVE
FISHERSVILLE, VA 22939

AUGUSTA HEALTH CARE INC PO BOX 79847 BALTIMORE, MD 21279

BB&T RECOVERY DEPARTMENT 4251 FAYETTEVILLE ROAD LUMBERTON, NC 28359

BLUE RIDGE FOOTCARE & SURGERY PLC 30 CROSSING LANE #105 LEXINGTON, VA 24450

CARILION CLINIC P.O. BOX 13966 ROANOKE, VA 24038

CARILION FRANKLIN MEMORIAL HOSPITAL 180 FLOYD AVENUE ROCKY MOUNT, VA 24151

CARS FINANCIAL PO BOX 630 CHRISTIANSBURG, VA 24073

CARTER BANK & TRUST 2155 JEFFERSON DAVIS HWY STAFFORD, VA 22554

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Reter, Jeremy and Jennifer -

CITY NATIONAL BANK ATTN: BANKRUPTCY PO BOX 785057 ORLANDO, FL 32878

COMCAST P O BOX 105184 ATLANTA, GA 30348-5184

COMMONWEALTH FINANCIAL 245 MAIN ST DICKSON CITY, PA 18519

CONVERGENT OUTSOURCING INC PO BOX 9004 RENTON, WA 98057-9004

CREDIT CONTROL CORP 11821 ROCK LANDING DR NEWPORT NEWS, VA 23606

CREDITORS COLLECTION SERVICE 4530 OLD CAVE SPRING ROAD ROANOKE, VA 24018

CREDITORS COLLECTION SERVICE PO BOX 21504 ROANOKE, VA 24018

DEFENSE FINANCE & ACCOUNTING SERVIC E. BROAD ST BLDG 21 COLUMBUS, OH 43218-1152

DIRECTV
ATTN: BANKRUPCTY CLAIMS
PO BOX 6550
GREENWOOD VILLAGE, CO 80155-6550

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL 32256

DRIVETIME ROANOKE 1354 E. MAIN STREET SALEM, VA 24153

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Reter, Jeremy and Jennifer -

EOS CCA PO BOX 981008 BOSTON, MA 02298

EYEONE PLC 620 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901

FIRST PREMIER BANK 3820 N LOUISE AVE SIOUX FALLS, SD 57104

FREEDOM FIRST CREDIT UNION 5240 VALLEYPARK DRIVE ROANOKE, VA 24019

GAD FINANCE INC 2032 PETERS CREEK ROAD ROANOKE, VA 24017

GM FINANCIAL PO BOX 181145 ARLINGTON, TX 76096

HOME IV CARE & NUTRITIONAL SERVICES 30 EBCO CIR #102 WAYNESBORO, VA 22980

HUNT RIDGE ASSOCIATES LLC 5 OFFICE CANTER LANE LEXINGTON, VA 24450

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN 55164

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN 56303

LEXINGTON FAMILY PRACTICE

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Reter, Jeremy and Jennifer -

LEXINGTON VIRGINIA EMERGENCY PHYS PO BOX 17571
BALTIMORE, MD 21297-1571

LINCARE
PO BOX 687
FOREST, VA 24551-0687

LOWES HOME CENTERS INC 1065 CURTIS BRIDGE ROAD WILKESBORO, NC 28697

MARK D. KIDD, ESQ. PO BOX 20487 ROANOKE, VA 24018

MEDEXPRESS URGENT CARE VIRGINIA 21504 TIMBERLAKE ROAD LYNCHBURG, VA 24505

MEDICAL DATA SYSTEMS I 128 W CENTER AVE FL 2 SEBRING, FL 33870

MILITARY STAR
3911 S WALTON WALKER BLV
DALLAS, TX 75236

MONTGOMERY WARD 1112 7TH AVE MONROE, WI 53566

PAYPAL, INC P. O. BOX 45950 OMAHA, NE 68145

PENN FOSTER SCHOOL 925 OAK STREET SCRANTON, PA 18515

PHYSICIANS TO CHILDREN PO BOX 8540 ROANOKE, VA 24014-0540

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Reter, Jeremy and Jennifer -

PIONR MIDCTR 4700 BELLEVIEW AVE STE 3 KANSAS CITY, MO 64112

PROGRESSIVE ADVANCED INSURANCE CO C/O CREDIT COLLECTION SERVICES TWO WELLS AVENUE NEWTON, MA 02459

PSSF INC 4700 BELLEVIEW AVE STE 3 KANSAS CITY, MO 64112

RECEIVABLE MANAGEMENT 240 EMERY ST BETHLEHEM, PA 18015

ROBERT C HULL DDS PC 650 NORTH LEE HWY STE 1 LEXINGTON, VA 24450-3759

ROCKBRIDGE COUNTY SCHOOLS

SCA CRED SVC 1502 WILLIAMSON ROAD NE ROANOKE, VA 24012

SCA CREDIT SERVICES 1502 WILLIAMSON ROAD, STE 100 ROANOKE, VA 24012

SCHEWEL FURNITURE 485 E NELSON ST LEXINGTON, VA 24450

SHENANDOAH PODIATRY 8782 CLOVERDALE ROAD TROUTVILLE, VA 24175

SOUTHWEST CREDIT SYSTE 4120 INTERNATIONAL PKWY CARROLLTON, TX 75007

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Reter, Jeremy and Jennifer -

SPRINT ATTN: BANKRUPTCY PO BOX 7949 OVERLAND PARK, KS 66207-0949

STERLING PROPERTIES & MANAGMENT 21 W NELSON STREET LEXINGTON, VA 24450

TBOM/TOTAL CRD 5109 S BROADBAND LN SIOUX FALLS, SD 57108

THE DANBURY MINT 47 RICHARDS AVENUE NORWALK, CT 06857

THOMAS JAMES 11241 FRANKLIN STREET FERRUM, VA 24088

TRANSWORLD SYS INC/51 500 VIRGINIA DR STE 514 FT WASHINGTON, PA 19034

TRIDENT ASST 10375 OLD ALABAMA RD STE ALPHARETTA, GA 30022

U S DEPT OF ED/GSL/ATL PO BOX 4222 IOWA CITY, IA 52244

UNIVERSITY OF PHOENIX 4615 E ELWOOD ST FL 3 PHOENIX, AZ 85040

US DEPT OF ED/GLELSI 2401 INTERNATIONAL LANE MADISON, WI 53704

USCB CORPORATION 101 HARRISON ST ARCHBALD, PA 18403

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Reter, Jeremy and Jennifer -

VALLEY CREDIT SERVICE PO BOX 7090 CHARLOTTESVILLE, VA 22906

VERIZON WIRELESS PO BOX 3397 BLOOMINGTON, IL 61702

WELLS FARGO BANK CREDIT BUREAU DISPUTE RESOLUTI DES MOINES, IA 50306